


Form 990



Department of the Treasury
Internal Revenue Service

Return of Organization Exempt From Income Tax

Under section 501(c), 527, or 4947(a)(1) of the Internal Revenue Code (except black lung benefit trust or private foundation)

The organization may have to use a copy of this return to satisfy state reporting requirements

OMB No 1545-0047

2009

Open to Public Inspection

A For the 2009 calendar year, or tax year beginning 07-01-2009 and ending 06-30-2010

B Check if applicable

☐ Address change

☐ Name change

☐ Initial return

☐ Terminated

☐ Amended return

☐ Application pending

Please use IRS label or print or type. See Specific Instructions.

C Name of organization

KANSAS ATHLETICS INCORPORATED

Doing Business As

Number and street (or P O box if mail is not delivered to street address)

Room/suite

1651 NAISMITH DRIVE

City or town, state or country, and ZIP + 4

LAWRENCE, KS 66045

D Employer identification number

48-6033929

E Telephone number

(785) 864-7914

G Gross receipts \$ 67,181,770

F Name and address of principal officer

Jerry Bailey

1651 NAISMITH DRIVE

LAWRENCE, KS 66045

H(a) Is this a group return for affiliates?

☐ Yes ☒ No

H(b) Are all affiliates included?

☐ Yes ☐ No

If "No," attach a list (see instructions)

H(c) Group exemption number

I Tax-exempt status

☒ 501(c) (3) ☐ (Insert no) ☐ 4947(a)(1) or ☐ 527

J Website:

www.kuathletics.com

K Form of organization

☒ Corporation ☐ Trust ☐ Association ☐ Other

L Year of formation 1925

M State of legal domicile KS

Part I

Summary

Activities & Governance	1	Briefly describe the organization's mission or most significant activities KANSAS ATHLETICS, INCORPORATED FUNCTIONS TO OPERATE THE INTERCOLLEGIATE ATHLETIC PROGRAM FOR THE UNIVERSITY ON THE VARSITY LEVEL THE PRIMARY SOURCE OF REVENUE IS DERIVED FROM ATHLETIC EVENTS		
	2	Check this box <input checked="" type="checkbox"/> if the organization discontinued its operations or disposed of more than 25% of its net assets		
	3	Number of voting members of the governing body (Part VI, line 1a)	3	6
	4	Number of independent voting members of the governing body (Part VI, line 1b)	4	0
	5	Total number of employees (Part V, line 2a)	5	732
	6	Total number of volunteers (estimate if necessary)	6	62
	7a	Total gross unrelated business revenue from Part VIII, column (C), line 12	7a	311,774
	b	Net unrelated business taxable income from Form 990-T, line 34	7b	
Revenue	8	Contributions and grants (Part VIII, line 1h)	Prior Year	Current Year
	9	Program service revenue (Part VIII, line 2g)	35,823,123	16,186,520
	10	Investment income (Part VIII, column (A), lines 3, 4, and 7d)	35,247,587	36,426,097
	11	Other revenue (Part VIII, column (A), lines 5, 6d, 8c, 9c, 10c, and 11e)	2,134,757	1,186,062
	12	Total revenue—add lines 8 through 11 (must equal Part VIII, column (A), line 12)	12,006,870	13,291,449
			85,212,337	67,090,128
Expenses	13	Grants and similar amounts paid (Part IX, column (A), lines 1–3)	8,006,843	8,844,240
	14	Benefits paid to or for members (Part IX, column (A), line 4)	0	0
	15	Salaries, other compensation, employee benefits (Part IX, column (A), lines 5–10)	26,607,308	26,151,537
	16a	Professional fundraising fees (Part IX, column (A), line 11e)	0	0
	b	Total fundraising expenses (Part IX, column (D), line 25) 3,607,105		
	17	Other expenses (Part IX, column (A), lines 11a–11d, 11f–24f)	29,805,766	32,585,254
	18	Total expenses Add lines 13–17 (must equal Part IX, column (A), line 25)	64,419,917	67,581,031
	19	Revenue less expenses Subtract line 18 from line 12	20,792,420	-490,903
Net Assets or Fund Balances			Beginning of Current Year	End of Year
	20	Total assets (Part X, line 16)	143,475,290	134,001,163
	21	Total liabilities (Part X, line 26)	93,670,643	83,030,320
	22	Net assets or fund balances Subtract line 21 from line 20	49,804,647	50,970,843

Part II

Signature Block

Sign Here

Under penalties of perjury, I declare that I have examined this return, including accompanying schedules and statements, and to the best of my knowledge and belief, it is true, correct, and complete Declaration of preparer (other than officer) is based on all information of which preparer has any knowledge

Signature of officer

2011-05-12

Date

Sheahon Zenger Director of Athletics

Type or print name and title

Paid Preparer's Use Only

Preparer's signature

KIMBERLY SCHRANT

Date

Check if self-employed ☐

Preparer's identifying number (see instructions)

Firm's name (or yours if self-employed), address, and ZIP + 4

Grant Thornton LLP

1201 Walnut Street Suite 1000

Kansas City, MO 64106

EIN

Phone no (816) 412-2400

May the IRS discuss this return with the preparer shown above? (see instructions)

☒ Yes ☐ No

For Privacy Act and Paperwork Reduction Act Notice, see the separate instructions.

Cat No 11282Y

Form 990 (2009)

1 Briefly describe the organization's mission

2 Did the organization undertake any significant program services during the year which were not listed on the prior Form 990 or 990-EZ? ☐ Yes ☒ No

If "Yes," describe these new services on Schedule O

3 Did the organization cease conducting, or make significant changes in how it conducts, any program services? ☐ Yes ☒ No

If "Yes," describe these changes on Schedule O

4 Describe the exempt purpose achievements for each of the organization's three largest program services by expenses. Section 501(c)(3) and 501(c)(4) organizations and section 4947(a)(1) trusts are required to report the amount of grants and allocations to others, the total expenses, and revenue, if any, for each program service reported.

4a (Code) (Expenses \$ 42,151,302 including grants of \$ 8,467,171) (Revenue \$ 34,426,097)

INTERCOLLEGIATE ATHLETIC COMPETITION FOR THE UNIVERSITY OF KANSAS STUDENTS INCLUDING SPORTS ACTIVITIES, SCHOLARSHIPS, ATHLETIC TRAINING, STUDENT SUPPORT SERVICES, STRENGTH DEVELOPMENT, AND ATHLETIC FACILITIES

4b (Code) (Expenses \$ including grants of \$) (Revenue \$)

4c (Code) (Expenses \$ including grants of \$) (Revenue \$)










4d Other program services (Describe in Schedule O)

(Expenses \$ _____ including grants of \$ _____) (Revenue \$ _____)

4e	Total program service expenses	\$ 42,151,302
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Part IV

Checklist of Required Schedules

		Yes	No		
1	Is the organization described in section 501(c)(3) or 4947(a)(1) (other than a private foundation)? If "Yes," complete Schedule A 	1	Yes		
2	Is the organization required to complete Schedule B, Schedule of Contributors? 	2	Yes		
3	Did the organization engage in direct or indirect political campaign activities on behalf of or in opposition to candidates for public office? If "Yes," complete Schedule C, Part I	3		No	
4	Section 501(c)(3) organizations. Did the organization engage in lobbying activities? If "Yes," complete Schedule C, Part II	4		No	
5	Section 501(c)(4), 501(c)(5), and 501(c)(6) organizations. Is the organization subject to the section 6033(e) notice and reporting requirement and proxy tax? If "Yes," complete Schedule C, Part III	5			
6	Did the organization maintain any donor advised funds or any similar funds or accounts where donors have the right to provide advice on the distribution or investment of amounts in such funds or accounts? If "Yes," complete Schedule D, Part I 	6		No	
7	Did the organization receive or hold a conservation easement, including easements to preserve open space, the environment, historic land areas or historic structures? If "Yes," complete Schedule D, Part II 	7		No	
8	Did the organization maintain collections of works of art, historical treasures, or other similar assets? If "Yes," complete Schedule D, Part III 	8	Yes		
9	Did the organization report an amount in Part X, line 21, serve as a custodian for amounts not listed in Part X, or provide credit counseling, debt management, credit repair, or debt negotiation services? If "Yes," complete Schedule D, Part IV 	9		No	
10	Did the organization, directly or through a related organization, hold assets in term, permanent, or quasi-endowments? If "Yes," complete Schedule D, Part V 	10	Yes		
11	Is the organization's answer to any of the following questions "Yes"? If so, complete Schedule D, Parts VI, VII, VIII, IX, or X as applicable.	11	Yes		
	• Did the organization report an amount for land, buildings, and equipment in Part X, line 10? If "Yes," complete Schedule D, Part VI.				
	• Did the organization report an amount for investments—other securities in Part X, line 12 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VII.				
	• Did the organization report an amount for investments—program related in Part X, line 13 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part VIII.				
	• Did the organization report an amount for other assets in Part X, line 15 that is 5% or more of its total assets reported in Part X, line 16? If "Yes," complete Schedule D, Part IX.				
	• Did the organization report an amount for other liabilities in Part X, line 25? If "Yes," complete Schedule D, Part X.				
	• Did the organization's separate or consolidated financial statements for the tax year include a footnote that addresses the organization's liability for uncertain tax positions under FIN 48? If "Yes," complete Schedule D, Part X.				
12	Did the organization obtain separate, independent audited financial statements for the tax year? If "Yes," complete Schedule D, Parts XI, XII, and XIII 	12		No	
12A	Was the organization included in consolidated, independent audited financial statements for the tax year?	Yes	No		
	If "Yes," completing Schedule D, Parts XI, XII, and XIII is optional		12A	Yes	
13	Is the organization a school described in section 170(b)(1)(A)(ii)? If "Yes," complete Schedule E	13		No	
14a	Did the organization maintain an office, employees, or agents outside of the United States?	14a		No	
b	Did the organization have aggregate revenues or expenses of more than \$10,000 from grantmaking, fundraising, business, and program service activities outside the United States? If "Yes," complete Schedule F, Part I	14b		No	
15	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of grants or assistance to any organization or entity located outside the U S ? If "Yes," complete Schedule F, Part II	15		No	
16	Did the organization report on Part IX, column (A), line 3, more than \$5,000 of aggregate grants or assistance to individuals located outside the U S ? If "Yes," complete Schedule F, Part III	16		No	
17	Did the organization report a total of more than \$15,000, of expenses for professional fundraising services on Part IX, column (A), lines 6 and 11e? If "Yes," complete Schedule G, Part I	17		No	
18	Did the organization report more than \$15,000 total of fundraising event gross income and contributions on Part VIII, lines 1c and 8a? If "Yes," complete Schedule G, Part II	18		No	
19	Did the organization report more than \$15,000 of gross income from gaming activities on Part VIII, line 9a? If "Yes," complete Schedule G, Part III	19		No	
20	Did the organization operate one or more hospitals? If "Yes," complete Schedule H	20		No	

Part IV

Checklist of Required Schedules (continued)

21	Did the organization report more than \$5,000 of grants and other assistance to governments and organizations in the United States on Part IX, column (A), line 1? <i>If "Yes," complete Schedule I, Parts I and II</i>	21		No
22	Did the organization report more than \$5,000 of grants and other assistance to individuals in the United States on Part IX, column (A), line 2? <i>If "Yes," complete Schedule I, Parts I and III</i>	22	Yes	
23	Did the organization answer "Yes" to Part VII, Section A, questions 3, 4, or 5, about compensation of the organization's current and former officers, directors, trustees, key employees, and highest compensated employees? <i>If "Yes," complete Schedule J</i>	23	Yes	
24a	Did the organization have a tax-exempt bond issue with an outstanding principal amount of more than \$100,000 as of the last day of the year, that was issued after December 31, 2002? <i>If "Yes," answer questions 24b-24d and complete Schedule K. If "No," go to line 25</i>	24a	Yes	
b	Did the organization invest any proceeds of tax-exempt bonds beyond a temporary period exception?	24b		No
c	Did the organization maintain an escrow account other than a refunding escrow at any time during the year to defease any tax-exempt bonds?	24c		No
d	Did the organization act as an "on behalf of" issuer for bonds outstanding at any time during the year?	24d		No
25a	Section 501(c)(3) and 501(c)(4) organizations. Did the organization engage in an excess benefit transaction with a disqualified person during the year? <i>If "Yes," complete Schedule L, Part I</i>	25a		No
b	Is the organization aware that it engaged in an excess benefit transaction with a disqualified person in a prior year, and that the transaction has not been reported on any of the organization's prior Forms 990 or 990-EZ? <i>If "Yes," complete Schedule L, Part I</i>	25b		No
26	Was a loan to or by a current or former officer, director, trustee, key employee, highly compensated employee, or disqualified person outstanding as of the end of the organization's tax year? <i>If "Yes," complete Schedule L, Part II</i>	26		No
27	Did the organization provide a grant or other assistance to an officer, director, trustee, key employee, substantial contributor, or a grant selection committee member, or to a person related to such an individual? <i>If "Yes," complete Schedule L, Part III</i>	27		No
28	Was the organization a party to a business transaction with one of the following parties? (see Schedule L, Part IV instructions for applicable filing thresholds, conditions, and exceptions)			
a	A current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28a		No
b	A family member of a current or former officer, director, trustee, or key employee? <i>If "Yes," complete Schedule L, Part IV</i>	28b		No
c	An entity of which a current or former officer, director, trustee, or key employee of the organization (or a family member) was an officer, director, trustee, or owner? <i>If "Yes," complete Schedule L, Part IV</i>	28c		No
29	Did the organization receive more than \$25,000 in non-cash contributions? <i>If "Yes," complete Schedule M</i>	29	Yes	
30	Did the organization receive contributions of art, historical treasures, or other similar assets, or qualified conservation contributions? <i>If "Yes," complete Schedule M</i>	30		No
31	Did the organization liquidate, terminate, or dissolve and cease operations? <i>If "Yes," complete Schedule N, Part I</i>	31		No
32	Did the organization sell, exchange, dispose of, or transfer more than 25% of its net assets? <i>If "Yes," complete Schedule N, Part II</i>	32		No
33	Did the organization own 100% of an entity disregarded as separate from the organization under Regulations sections 301.7701-2 and 301.7701-3? <i>If "Yes," complete Schedule R, Part I</i>	33	Yes	
34	Was the organization related to any tax-exempt or taxable entity? <i>If "Yes," complete Schedule R, Parts II, III, IV, and V, line 1</i>	34	Yes	
35	Is any related organization a controlled entity within the meaning of section 512(b)(13)? <i>If "Yes," complete Schedule R, Part V, line 2</i>	35		No
36	Section 501(c)(3) organizations. Did the organization make any transfers to an exempt non-charitable related organization? <i>If "Yes," complete Schedule R, Part V, line 2</i>	36		No
37	Did the organization conduct more than 5% of its activities through an entity that is not a related organization and that is treated as a partnership for federal income tax purposes? <i>If "Yes," complete Schedule R, Part VI</i>	37		No
38	Did the organization complete Schedule O and provide explanations in Schedule O for Part VI, lines 11 and 19? Note. All Form 990 filers are required to complete Schedule O	38	Yes	

Part V

Statements Regarding Other IRS Filings and Tax Compliance

			Yes	No
1a	Enter the number reported in Box 3 of Form 1096, <i>Annual Summary and Transmittal of U.S. Information Returns</i> . Enter -0- if not applicable	1a	245	
	b	Enter the number of Forms W-2G included in line 1a. Enter -0- if not applicable	1b	
c Did the organization comply with backup withholding rules for reportable payments to vendors and reportable gaming (gambling) winnings to prize winners?			1c	Yes
2a	Enter the number of employees reported on Form W-3, <i>Transmittal of Wage and Tax Statements</i> filed for the calendar year ending with or within the year covered by this return	2a	732	
	b If at least one is reported on line 2a, did the organization file all required federal employment tax returns? Note: If the sum of lines 1a and 2a is greater than 250, you may be required to e-file this return (see instructions)			
3a Did the organization have unrelated business gross income of \$1,000 or more during the year covered by this return?			3a	Yes
b If "Yes," has it filed a Form 990-T for this year? If "No," provide an explanation in Schedule O			3b	Yes
4a At any time during the calendar year, did the organization have an interest in, or a signature or other authority over, a financial account in a foreign country (such as a bank account, securities account, or other financial account)?			4a	No
b If "Yes," enter the name of the foreign country: <input type="text"/> See the instructions for exceptions and filing requirements for Form TD F 90-22.1, Report of Foreign Bank and Financial Accounts				
5a Was the organization a party to a prohibited tax shelter transaction at any time during the tax year? . . .			5a	No
b Did any taxable party notify the organization that it was or is a party to a prohibited tax shelter transaction?			5b	No
c If "Yes" to line 5a or 5b, did the organization file Form 8886-T, Disclosure by Tax-Exempt Entity Regarding Prohibited Tax Shelter Transaction?			5c	
6a Does the organization have annual gross receipts that are normally greater than \$100,000, and did the organization solicit any contributions that were not tax deductible?			6a	No
b If "Yes," did the organization include with every solicitation an express statement that such contributions or gifts were not tax deductible?			6b	
7 Organizations that may receive deductible contributions under section 170(c).				
a Did the organization receive a payment in excess of \$75 made partly as a contribution and partly for goods and services provided to the payor?			7a	No
b If "Yes," did the organization notify the donor of the value of the goods or services provided?			7b	
c Did the organization sell, exchange, or otherwise dispose of tangible personal property for which it was required to file Form 8282?			7c	No
d If "Yes," indicate the number of Forms 8282 filed during the year			7d	
e Did the organization, during the year, receive any funds, directly or indirectly, to pay premiums on a personal benefit contract?			7e	No
f Did the organization, during the year, pay premiums, directly or indirectly, on a personal benefit contract? . . .			7f	No
g For all contributions of qualified intellectual property, did the organization file Form 8899 as required? . . .			7g	
h For contributions of cars, boats, airplanes, and other vehicles, did the organization file a Form 1098-C as required?			7h	
8 Sponsoring organizations maintaining donor advised funds and section 509(a)(3) supporting organizations. Did the supporting organization, or a donor advised fund maintained by a sponsoring organization, have excess business holdings at any time during the year?			8	
9 Sponsoring organizations maintaining donor advised funds.				
a Did the organization make any taxable distributions under section 4966?			9a	
b Did the organization make a distribution to a donor, donor advisor, or related person?			9b	
10 Section 501(c)(7) organizations. Enter				
a Initiation fees and capital contributions included on Part VIII, line 12			10a	
b Gross receipts, included on Form 990, Part VIII, line 12, for public use of club facilities			10b	
11 Section 501(c)(12) organizations. Enter				
a Gross income from members or shareholders			11a	
b Gross income from other sources (Do not net amounts due or paid to other sources against amounts due or received from them)			11b	
12a Section 4947(a)(1) non-exempt charitable trusts. Is the organization filing Form 990 in lieu of Form 1041?			12a	
b If "Yes," enter the amount of tax-exempt interest received or accrued during the year			12b	

Part VI

Governance, Management, and Disclosure

For each "Yes" response to lines 2 through 7b below, and for a "No" response to lines 8a, 8b, or 10b below, describe the circumstances, processes, or changes in Schedule O. See instructions.

Section A. Governing Body and Management

			Yes	No
1a	Enter the number of voting members of the governing body	1a	6	
b	Enter the number of voting members that are independent	1b	0	
2	Did any officer, director, trustee, or key employee have a family relationship or a business relationship with any other officer, director, trustee, or key employee?	2		No
3	Did the organization delegate control over management duties customarily performed by or under the direct supervision of officers, directors or trustees, or key employees to a management company or other person?	3		No
4	Did the organization make any significant changes to its organizational documents since the prior Form 990 was filed?	4		No
5	Did the organization become aware during the year of a material diversion of the organization's assets?	5	Yes	
6	Does the organization have members or stockholders?	6		No
7a	Does the organization have members, stockholders, or other persons who may elect one or more members of the governing body?	7a		No
b	Are any decisions of the governing body subject to approval by members, stockholders, or other persons?	7b		No
8	Did the organization contemporaneously document the meetings held or written actions undertaken during the year by the following			
a	The governing body?	8a	Yes	
b	Each committee with authority to act on behalf of the governing body?	8b	Yes	
9	Is there any officer, director, trustee, or key employee listed in Part VII, Section A, who cannot be reached at the organization's mailing address? If "Yes," provide the names and addresses in Schedule O	9	Yes	

Section B. Policies

(This Section B requests information about policies not required by the Internal Revenue Code.)

			Yes	No
10a	Does the organization have local chapters, branches, or affiliates?	10a		No
b	If "Yes," does the organization have written policies and procedures governing the activities of such chapters, affiliates, and branches to ensure their operations are consistent with those of the organization?	10b		
11	Has the organization provided a copy of this Form 990 to all members of its governing body before filing the form?	11	Yes	
11A	Describe in Schedule O the process, if any, used by the organization to review the Form 990			
12a	Does the organization have a written conflict of interest policy? If "No," go to line 13	12a	Yes	
b	Are officers, directors or trustees, and key employees required to disclose annually interests that could give rise to conflicts?	12b	Yes	
c	Does the organization regularly and consistently monitor and enforce compliance with the policy? If "Yes," describe in Schedule O how this is done	12c	Yes	
13	Does the organization have a written whistleblower policy?	13	Yes	
14	Does the organization have a written document retention and destruction policy?	14	Yes	
15	Did the process for determining compensation of the following persons include a review and approval by independent persons, comparability data, and contemporaneous substantiation of the deliberation and decision?			
a	The organization's CEO, Executive Director, or top management official	15a	Yes	
b	Other officers or key employees of the organization	15b	Yes	
	If "Yes" to line a or b, describe the process in Schedule O (See instructions)			
16a	Did the organization invest in, contribute assets to, or participate in a joint venture or similar arrangement with a taxable entity during the year?	16a		No
b	If "Yes," has the organization adopted a written policy or procedure requiring the organization to evaluate its participation in joint venture arrangements under applicable federal tax law, and taken steps to safeguard the organization's exempt status with respect to such arrangements?	16b		

Section C. Disclosure

17	List the States with which a copy of this Form 990 is required to be filed▶KS
18	Section 6104 requires an organization to make its Form 1023 (or 1024 if applicable), 990, and 990-T (501(c) (3)s only) available for public inspection. Indicate how you make these available. Check all that apply. <input checked="" type="checkbox"/> Own website <input type="checkbox"/> Another's website <input checked="" type="checkbox"/> Upon request
19	Describe in Schedule O whether (and if so, how), the organization makes its governing documents, conflict of interest policy, and financial statements available to the public. See Additional Data Table.
20	State the name, physical address, and telephone number of the person who possesses the books and records of the organization ▶ SUSAN WACHTER 1651 NAISMITH DRIVE LAWRENCE, KS 66045 (785) 864-7914

Section A. Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

• List all of the organization's **former directors or trustees** that received, in the capacity as a former director or trustee of the organization, more than \$10,000 of reportable compensation from the organization and any related organizations

☐ Check this box if the organization did not compensate any current or former officer, director, trustee or key employee

Form **990** (2009)

1b	Total	6,563,117	5,262,065	985,686
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2 Total number of individuals (including but not limited to those listed above) who received more than \$100,000 in reportable compensation from the organization **49**

		Yes	No
3	Did the organization list any former officer, director or trustee, key employee, or highest compensated employee on line 1a? <i>If "Yes," complete Schedule J for such individual</i>	3 Yes	
4	For any individual listed on line 1a, is the sum of reportable compensation and other compensation from the organization and related organizations greater than \$150,000? <i>If "Yes," complete Schedule J for such individual</i>	4 Yes	
5	Did any person listed on line 1a receive or accrue compensation from any unrelated organization for services rendered to the organization? <i>If "Yes," complete Schedule J for such person</i>	5	No

Section B. Independent Contractors

1 Complete this table for your five highest compensated independent contractors that received more than \$100,000 of compensation from the organization

(A) Name and business address	(B) Description of services	(C) Compensation
FIELDTURF USA 2308 DALTON INDUSTRIAL CT DALTON, GA 30721	LANDSCAPING	820,344
FIRST CONSTRUCTION LLC 601 N IOWA LAWRENCE, KS 66044	CONSTRUCTION	2,867,914
BCLT LLC 1651 NAISMITH DRIVE LAWRENCE, KS 66045	MEDIA	2,270,100
JAYHAWK SPORTS MKTGIMG COMMUNICATI 546 E MAIN ST LEXINGTON, KY 40508	MARKETING	648,974
GOULD EVANS ASSOCIATES LC 706 MASSACHUSETTS ST LAWRENCE, KS 66044	ARCHITECTURE	578,273

2 Total number of independent contractors (including but not limited to those listed above) who received more than \$100,000 in compensation from the organization **37**

Part VIII

Statement of Revenue

				(A) Total revenue	(B) Related or exempt function revenue	(C) Unrelated business revenue	(D) Revenue excluded from tax under sections 512, 513, or 514	
Contributions, gifts, grants and other similar amounts	1a	Federated campaigns . . .	1a					
	b	Membership dues	1b					
	c	Fundraising events	1c					
	d	Related organizations	1d					
	e	Government grants (contributions)	1e					
	f	All other contributions, gifts, grants, and similar amounts not included above	1f	16,186,520				
	g	Noncash contributions included in lines 1a-1f \$ 1,116,871						
	h	Total. Add lines 1a-1f		16,186,520				
Program Service Revenue			Business Code					
	2a	SPORTS ACTIVITIES		22,523,365	22,523,365			
	b	BIG XII CONF/NCAA		11,895,975	11,895,975			
	c	STUDENT ACTIVITY FEES		1,948,967	1,948,967			
	d	LTR WINNER/BOOSTER CLUBS		57,790	57,790			
	e							
	f	All other program service revenue						
	g	Total. Add lines 2a-2f		36,426,097				
Other Revenue	3	Investment income (including dividends, interest and other similar amounts)		1,186,062			1,186,062	
	4	Income from investment of tax-exempt bond proceeds . . .		0				
	5	Royalties		7,586,201			7,586,201	
	6a	Gross Rents	(i) Real	(ii) Personal				
		b	Less rental expenses					
		c	Rental income or (loss)					
		d	Net rental income or (loss)					
	7a	Gross amount from sales of assets other than inventory	(i) Securities	(ii) Other				
		b	Less cost or other basis and sales expenses					
		c	Gain or (loss)					
		d	Net gain or (loss)		0			
	8a	Gross income from fundraising events (not including \$ _____ of contributions reported on line 1c) See Part IV, line 18	a					
		b	Less direct expenses	b				
		c	Net income or (loss) from fundraising events . . .		0			
	9a	Gross income from gaming activities See Part IV, line 19	a					
		b	Less direct expenses	b				
		c	Net income or (loss) from gaming activities . . .		0			
	10a	Gross sales of inventory, less returns and allowances	a	239,187				
		b	Less cost of goods sold	b	91,642			
		c	Net income or (loss) from sales of inventory . . .		147,545		147,545	
Miscellaneous Revenue		Business Code						
11a	TRADEMARK/LICENSE		3,482,729	3,482,729				
b	OTHER INCOME		1,400,002	1,400,002				
c	PROMOTIONS		510,743	510,743				
d	All other revenue		164,229		164,229			
e	Total. Add lines 11a-11d		5,557,703					
12	Total revenue. See Instructions		67,090,128	41,819,571	311,774		8,772,263	

Part IX

Statement of Functional Expenses

Section 501(c)(3) and 501(c)(4) organizations must complete all columns.

All other organizations must complete column (A) but are not required to complete columns (B), (C), and (D).

Do not include amounts reported on lines 6b, 7b, 8b, 9b, and 10b of Part VIII.		(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
1	Grants and other assistance to governments and organizations in the U S See Part IV, line 21	0			
2	Grants and other assistance to individuals in the U S See Part IV, line 22	8,844,240	8,844,240		
3	Grants and other assistance to governments, organizations, and individuals outside the U S See Part IV, lines 15 and 16	0			
4	Benefits paid to or for members	0			
5	Compensation of current officers, directors, trustees, and key employees	1,223,912		1,223,912	
6	Compensation not included above, to disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B)	0			
7	Other salaries and wages	21,322,270	16,343,814	3,716,530	1,261,926
8	Pension plan contributions (include section 401(k) and section 403(b) employer contributions)	1,257,043	880,063	287,906	89,074
9	Other employee benefits	1,156,829	797,405	278,859	80,565
10	Payroll taxes	1,191,483	826,073	284,522	80,888
11	Fees for services (non-employees)				
a	Management	0			
b	Legal	0			
c	Accounting	90	90		
d	Lobbying	0			
e	Professional fundraising See Part IV, line 17	0			
f	Investment management fees	0			
g	Other	0			
12	Advertising and promotion	431,664	37,224	358,005	36,435
13	Office expenses	0			
14	Information technology	0			
15	Royalties	0			
16	Occupancy	0			
17	Travel	5,733,273	5,302,580	338,598	92,095
18	Payments of travel or entertainment expenses for any federal, state, or local public officials	0			
19	Conferences, conventions, and meetings	0			
20	Interest	2,576,323	254,600	2,321,723	
21	Payments to affiliates	0			
22	Depreciation, depletion, and amortization	1,006,854	14,146	992,708	
23	Insurance	519,468	81,032	438,436	
24	Other expenses Itemize expenses not covered above (Expenses grouped together and labeled miscellaneous may not exceed 5% of total expenses shown on line 25 below)				
a	SUPPLIES	1,312,932	650,593	538,218	124,121
b	TELEPHONE	549,703	298,768	223,480	27,455
c	POSTAGE AND SHIPPING	182,011	106,050	48,232	27,729
d	EQUIPMENT RENTAL	745,261	208,802	522,169	14,290
e	PRINTING AND PUBLICATIONS	610,910	267,070	253,218	90,622
f	All other expenses	18,916,765	7,493,352	9,741,508	1,681,905
25	Total functional expenses. Add lines 1 through 24f	67,581,031	42,405,902	21,568,024	3,607,105
26	Joint costs. Check here <input type="checkbox"/> if following SOP 98-2 Complete this line only if the organization reported in column (B) joint costs from a combined educational campaign and fundraising solicitation				

Part X

Balance Sheet

					(A)		(B)
					Beginning of year		End of year
Assets	1	Cash—non-interest-bearing			5,143,142	1	2,813,380
	2	Savings and temporary cash investments				2	
	3	Pledges and grants receivable, net			28,425,750	3	19,263,302
	4	Accounts receivable, net			7,578,859	4	4,898,129
	5	Receivables from current and former officers, directors, trustees, key employees, and highest compensated employees Complete Part II of Schedule L				5	
	6	Receivables from other disqualified persons (as defined under section 4958(f)(1)) and persons described in section 4958(c)(3)(B) Complete Part II of Schedule L				6	
	7	Notes and loans receivable, net				7	
	8	Inventories for sale or use				8	
	9	Prepaid expenses and deferred charges			616,628	9	636,447
	10a	Land, buildings, and equipment cost or other basis Complete Part VI of Schedule D	10a	70,434,368	39,884,480	10c	62,039,042
	b	Less accumulated depreciation	10b	8,395,326			
	11	Investments—publicly traded securities				11	
	12	Investments—other securities See Part IV, line 11				12	
	13	Investments—program-related See Part IV, line 11				13	
	14	Intangible assets				14	
	15	Other assets See Part IV, line 11			61,826,431	15	44,350,863
	16	Total assets. Add lines 1 through 15 (must equal line 34)			143,475,290	16	134,001,163
Liabilities	17	Accounts payable and accrued expenses			5,738,417	17	3,993,858
	18	Grants payable				18	
	19	Deferred revenue				19	
	20	Tax-exempt bond liabilities			46,565,000	20	45,430,000
	21	Escrow or custodial account liability Complete Part IV of Schedule D				21	
	22	Payables to current and former officers, directors, trustees, key employees, highest compensated employees, and disqualified persons Complete Part II of Schedule L				22	
	23	Secured mortgages and notes payable to unrelated third parties			6,000,000	23	6,000,000
	24	Unsecured notes and loans payable to unrelated third parties				24	
	25	Other liabilities Complete Part X of Schedule D			35,367,226	25	27,606,462
	26	Total liabilities. Add lines 17 through 25			93,670,643	26	83,030,320
Net Assets or Fund Balances	Organizations that follow SFAS 117, check here <input checked="" type="checkbox"/> and complete lines 27 through 29, and lines 33 and 34.						
	27	Unrestricted net assets			-940,923	27	10,313,043
	28	Temporarily restricted net assets			27,729,149	28	17,348,913
	29	Permanently restricted net assets			23,016,421	29	23,308,887
	Organizations that do not follow SFAS 117, check here <input type="checkbox"/> and complete lines 30 through 34.						
	30	Capital stock or trust principal, or current funds				30	
	31	Paid-in or capital surplus, or land, building or equipment fund				31	
	32	Retained earnings, endowment, accumulated income, or other funds				32	
	33	Total net assets or fund balances			49,804,647	33	50,970,843
	34	Total liabilities and net assets/fund balances			143,475,290	34	134,001,163

Part XI Financial Statements and Reporting

	Yes	No
1 Accounting method used to prepare the Form 990 <input type="checkbox"/> Cash <input checked="" type="checkbox"/> Accrual <input type="checkbox"/> Other _____ If the organization changed its method of accounting from a prior year or checked "Other," explain in Schedule O		
2a Were the organization's financial statements compiled or reviewed by an independent accountant? . . .		No
b Were the organization's financial statements audited by an independent accountant?	Yes	
c If "Yes," to 2a or 2b, does the organization have a committee that assumes responsibility for oversight of the audit, review, or compilation of its financial statements and selection of an independent accountant? If the organization changed either its oversight process or selection process during the tax year, explain in Schedule O	Yes	
d If "Yes" to line 2a or 2b, check a box below to indicate whether the financial statements for the year were issued on a consolidated basis, separate basis, or both <input type="checkbox"/> Separate basis <input checked="" type="checkbox"/> Consolidated basis <input type="checkbox"/> Both consolidated and separated basis		
3a As a result of a federal award, was the organization required to undergo an audit or audits as set forth in the Single Audit Act and OMB Circular A-133?		No
b If "Yes," did the organization undergo the required audit or audits? If the organization did not undergo the required audit or audits, explain why in Schedule O and describe any steps taken to undergo such audits . . .		

SCHEDULE A
(Form 990 or 990EZ)

Department of the Treasury
Internal Revenue Service

Public Charity Status and Public Support

Complete if the organization is a section 501(c)(3) organization or a section 4947(a)(1) nonexempt charitable trust.

▶ Attach to Form 990 or Form 990-EZ. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
KANSAS ATHLETICS INCORPORATED

Employer identification number
48-6033929

Part I Reason for Public Charity Status (All organizations must complete this part.) See instructions

The organization is not a private foundation because it is (For lines 1 through 11, check only one box)

1

☐

A church, convention of churches, or association of churches **section 170(b)(1)(A)(i).**

2

☐

A school described in **section 170(b)(1)(A)(ii).** (Attach Schedule E)

3

☐

A hospital or a cooperative hospital service organization described in **section 170(b)(1)(A)(iii).**

4

☐

A medical research organization operated in conjunction with a hospital described in **section 170(b)(1)(A)(iii).** Enter the hospital's name, city, and state

5

☐

An organization operated for the benefit of a college or university owned or operated by a governmental unit described in **section 170(b)(1)(A)(iv).** (Complete Part II)

6

☐

A federal, state, or local government or governmental unit described in **section 170(b)(1)(A)(v).**

7

☐

An organization that normally receives a substantial part of its support from a governmental unit or from the general public described in **section 170(b)(1)(A)(vi)** (Complete Part II)

8

☐

A community trust described in **section 170(b)(1)(A)(vi)** (Complete Part II)

9

☒

An organization that normally receives (1) more than 33 1/3% of its support from contributions, membership fees, and gross receipts from activities related to its exempt functions—subject to certain exceptions, and (2) no more than 33 1/3% of its support from gross investment income and unrelated business taxable income (less section 511 tax) from businesses acquired by the organization after June 30, 1975 See **section 509(a)(2).** (Complete Part III)

10

☐

An organization organized and operated exclusively to test for public safety See**section 509(a)(4).**

11

☐

An organization organized and operated exclusively for the benefit of, to perform the functions of, or to carry out the purposes of one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2) See **section 509(a)(3).** Check the box that describes the type of supporting organization and complete lines 11e through 11h

a

☐

Type I

b

☐

Type II

c

☐

Type III - Functionally integrated

d

☐

Type III - Other

e

☐

By checking this box, I certify that the organization is not controlled directly or indirectly by one or more disqualified persons other than foundation managers and other than one or more publicly supported organizations described in section 509(a)(1) or section 509(a)(2)

f

☐

If the organization received a written determination from the IRS that it is a Type I, Type II or Type III supporting organization, check this box

g

☐

Since August 17, 2006, has the organization accepted any gift or contribution from any of the following persons?

(i)

a person who directly or indirectly controls, either alone or together with persons described in (ii) and (iii) below, the governing body of the the supported organization?

(ii)

a family member of a person described in (i) above?

(iii)

a 35% controlled entity of a person described in (i) or (ii) above?

h

☐

Provide the following information about the supported organization(s)

	Yes	No
11g(i)		No
11g(ii)		No
11g(iii)		No

(i) Name of supported organization	(ii) EIN	(iii) Type of organization (described on lines 1- 9 above or IRC section (see instructions))	(iv) Is the organization in col (i) listed in your governing document?		(v) Did you notify the organization in col (i) of your support?		(vi) Is the organization in col (i) organized in the U S ?		(vii) Amount of support?
			Yes	No	Yes	No	Yes	No	
Total									

Part II

Support Schedule for Organizations Described in IRC 170(b)(1)(A)(iv) and 170(b)(1)(A)(vi)
(Complete only if you checked the box on line 5, 7, or 8 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1 Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")						
2 Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
3 The value of services or facilities furnished by a governmental unit to the organization without charge						
4 Total. Add lines 1 through 3						
5 The portion of total contributions by each person (other than a governmental unit or publicly supported organization) included on line 1 that exceeds 2% of the amount shown on line 11, column (f)						
6 Public Support. Subtract line 5 from line 4						

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
7 Amounts from line 4						
8 Gross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources						
9 Net income from unrelated business activities, whether or not the business is regularly carried on						
10 Other income (Explain in Part IV) Do not include gain or loss from the sale of capital assets						
11 Total support (Add lines 7 through 10)						
12 Gross receipts from related activities, etc (See instructions)					12	
13 First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here						

Section C. Computation of Public Support Percentage

14 Public Support Percentage for 2009 (line 6 column (f) divided by line 11 column (f))	14	
15 Public Support Percentage for 2008 Schedule A, Part II, line 14	15	
16a 33 1/3% support test—2009. If the organization did not check the box on line 13, and line 14 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
b 33 1/3% support test—2008. If the organization did not check the box on line 13 or 16a, and line 15 is 33 1/3% or more, check this box and stop here. The organization qualifies as a publicly supported organization		
17a 10%-facts-and-circumstances test—2009. If the organization did not check a box on line 13, 16a, or 16b and line 14 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
b 10%-facts-and-circumstances test—2008. If the organization did not check a box on line 13, 16a, 16b, or 17a and line 15 is 10% or more, and if the organization meets the "facts and circumstances" test, check this box and stop here. Explain in Part IV how the organization meets the "facts and circumstances" test The organization qualifies as a publicly supported organization		
18 Private Foundation If the organization did not check a box on line 13, 16a, 16b, 17a or 17b, check this box and see instructions		

Part IIISupport Schedule for Organizations Described in IRC 509(a)(2)
(Complete only if you checked the box on line 9 of Part I.)

Section A. Public Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
1Gifts, grants, contributions, and membership fees received (Do not include any "unusual grants.")	26,752,644	19,085,125	39,544,503	35,823,123	16,186,520	137,391,915
2Gross receipts from admissions, merchandise sold or services performed, or facilities furnished in any activity that is related to the organization's tax-exempt purpose	24,754,276	28,113,484	29,718,951	35,247,587	36,426,097	154,260,395
3Gross receipts from activities that are not an unrelated trade or business under section 513						
4Tax revenues levied for the organization's benefit and either paid to or expended on its behalf						
5The value of services or facilities furnished by a governmental unit to the organization without charge	503,268	446,269				949,537
6Total. Add lines 1 through 5	52,010,188	47,644,878	69,263,454	71,070,710	52,612,617	292,601,847
7aAmounts included on lines 1, 2, and 3 received from disqualified persons						
bAmounts included on lines 2 and 3 received from other than disqualified persons that exceed the greater of \$5,000 or 1% of the amount on line 13 for the year						
cAdd lines 7a and 7b						
8Public Support (Subtract line 7c from line 6)						292,601,847

Section B. Total Support

Calendar year (or fiscal year beginning in)	(a) 2005	(b) 2006	(c) 2007	(d) 2008	(e) 2009	(f) Total
9Amounts from line 6	52,010,188	47,644,878	69,263,454	71,070,710	52,612,617	292,601,847
10aGross income from interest, dividends, payments received on securities loans, rents, royalties and income from similar sources	9,397,782	10,288,210	12,958,644	7,935,873	8,772,263	49,352,772
bUnrelated business taxable income (less section 511 taxes) from businesses acquired after June 30, 1975						
cAdd lines 10a and 10b	9,397,782	10,288,210	12,958,644	7,935,873	8,772,263	49,352,772
11Net income from unrelated business activities not included in line 10b, whether or not the business is regularly carried on						
12Other income. Do not include gain or loss from the sale of capital assets (Explain in Part IV.)	627,980	1,409,251	1,350,540	6,171,018	5,557,703	15,116,492
13Total support (Add lines 9, 10c, 11 and 12)	62,035,950	59,342,339	83,572,638	85,177,601	66,942,583	357,071,111
14First Five Years If the Form 990 is for the organization's first, second, third, fourth, or fifth tax year as a 501(c)(3) organization, check this box and stop here	<input type="checkbox"/>					

Section C. Computation of Public Support Percentage

15Public Support Percentage for 2009 (line 8 column (f) divided by line 13 column (f))	15	81.945 %
16Public support percentage from 2008 Schedule A, Part III, line 15	16	84.112 %

Section D. Computation of Investment Income Percentage

17Investment income percentage for 2009 (line 10c column (f) divided by line 13 column (f))	17	13.822 %
18Investment income percentage from 2008 Schedule A, Part III, line 17	18	12.920 %
19a33 1/3% support tests—2009. If the organization did not check the box on line 14, and line 15 is more than 33 1/3% and line 17 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input checked="" type="checkbox"/>	
b33 1/3% support tests—2008. If the organization did not check a box on line 14 or line 19a, and line 16 is more than 33 1/3% and line 18 is not more than 33 1/3%, check this box and stop here. The organization qualifies as a publicly supported organization	<input type="checkbox"/>	
20Private Foundation If the organization did not check a box on line 14, 19a or 19b, check this box and see instructions	<input type="checkbox"/>	

Part IV

Supplemental Information. Supplemental Information. Complete this part to provide the explanation required by Part II, line 10; Part II, line 17a or 17b; or Part III, line 12. Provide any other additional information. See instructions

Explanation
OTHER INCOME INCLUDES TRADEMARK, LICENSING, APPAREL REVENUE, JAYHAWK TENNIS FACILITY REVENUE, PROMOTIONS REVENUE, AND MISCELLANEOUS REVENUE

SCHEDULE D
(Form 990)

Supplemental Financial Statements

▶ Complete if the organization answered "Yes," to Form 990, Part IV, line 6, 7, 8, 9, 10, 11, or 12.
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization KANSAS ATHLETICS INCORPORATED	Employer identification number 48-6033929
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Part I Organizations Maintaining Donor Advised Funds or Other Similar Funds or Accounts. Complete if the organization answered "Yes" to Form 990, Part IV, line 6.

	(a) Donor advised funds	(b) Funds and other accounts
1	Total number at end of year	
2	Aggregate contributions to (during year)	
3	Aggregate grants from (during year)	
4	Aggregate value at end of year	
5	Did the organization inform all donors and donor advisors in writing that the assets held in donor advised funds are the organization's property, subject to the organization's exclusive legal control? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	
6	Did the organization inform all grantees, donors, and donor advisors in writing that grant funds may be used only for charitable purposes and not for the benefit of the donor or donor advisor, or for any other purpose conferring impermissible private benefit <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>	

Part II Conservation Easements. Complete if the organization answered "Yes" to Form 990, Part IV, line 7.

1	Purpose(s) of conservation easements held by the organization (check all that apply) <div><input type="checkbox"/> Preservation of land for public use (e g , recreation or pleasure)<input type="checkbox"/> Preservation of an historically importantly land area <input type="checkbox"/> Protection of natural habitat<input type="checkbox"/> Preservation of a certified historic structure <input type="checkbox"/> Preservation of open space</div>										
2	Complete lines 2a–2d if the organization held a qualified conservation contribution in the form of a conservation easement on the last day of the tax year <table><tr><td></td><td>Held at the End of the Year</td></tr><tr><td>a</td><td>Total number of conservation easements</td></tr><tr><td>b</td><td>Total acreage restricted by conservation easements</td></tr><tr><td>c</td><td>Number of conservation easements on a certified historic structure included in (a)</td></tr><tr><td>d</td><td>Number of conservation easements included in (c) acquired after 8/17/06</td></tr></table>		Held at the End of the Year	a	Total number of conservation easements	b	Total acreage restricted by conservation easements	c	Number of conservation easements on a certified historic structure included in (a)	d	Number of conservation easements included in (c) acquired after 8/17/06
	Held at the End of the Year										
a	Total number of conservation easements										
b	Total acreage restricted by conservation easements										
c	Number of conservation easements on a certified historic structure included in (a)										
d	Number of conservation easements included in (c) acquired after 8/17/06										
3	Number of conservation easements modified, transferred, released, extinguished, or terminated by the organization during the taxable year ▶ _____										
4	Number of states where property subject to conservation easement is located ▶ _____										
5	Does the organization have a written policy regarding the periodic monitoring, inspection, handling of violations, and enforcement of the conservation easements it holds? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>										
6	Staff and volunteer hours devoted to monitoring, inspecting and enforcing conservation easements during the year ▶ _____										
7	Amount of expenses incurred in monitoring, inspecting, and enforcing conservation easements during the year ▶ \$ _____										
8	Does each conservation easement reported on line 2(d) above satisfy the requirements of section 170(h)(4)(B)(i) and 170(h)(4)(B)(ii)? <div><input type="checkbox"/> Yes <input type="checkbox"/> No</div>										
9	In Part XIV, describe how the organization reports conservation easements in its revenue and expense statement, and balance sheet, and include, if applicable, the text of the footnote to the organization’s financial statements that describes the organization’s accounting for conservation easements										

Part III Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets. Complete if the organization answered "Yes" to Form 990, Part IV, line 8.

1a	If the organization elected, as permitted under SFAS 116, not to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education or research in furtherance of public service, provide, in Part XIV, the text of the footnote to its financial statements that describes these items						
b	If the organization elected, as permitted under SFAS 116, to report in its revenue statement and balance sheet works of art, historical treasures, or other similar assets held for public exhibition, education, or research in furtherance of public service, provide the following amounts relating to these items <table><tr><td>(i)</td><td>Revenues included in Form 990, Part VIII, line 1</td><td>▶ \$ _____</td></tr><tr><td>(ii)</td><td>Assets included in Form 990, Part X</td><td>▶ \$ _____</td></tr></table>	(i)	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____	(ii)	Assets included in Form 990, Part X	▶ \$ _____
(i)	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____					
(ii)	Assets included in Form 990, Part X	▶ \$ _____					
2	If the organization received or held works of art, historical treasures, or other similar assets for financial gain, provide the following amounts required to be reported under SFAS 116 relating to these items <table><tr><td>a</td><td>Revenues included in Form 990, Part VIII, line 1</td><td>▶ \$ _____</td></tr><tr><td>b</td><td>Assets included in Form 990, Part X</td><td>▶ \$ _____</td></tr></table>	a	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____	b	Assets included in Form 990, Part X	▶ \$ _____
a	Revenues included in Form 990, Part VIII, line 1	▶ \$ _____					
b	Assets included in Form 990, Part X	▶ \$ _____					

Part III

Organizations Maintaining Collections of Art, Historical Treasures, or Other Similar Assets (continued)

3

Using the organization's accession and other records, check any of the following that are a significant use of its collection items (check all that apply)

a

☒

Public exhibition

b

☐

Scholarly research

c

☐

Preservation for future generations

d

☒

Loan or exchange programs

e

☐

Other

4

Provide a description of the organization's collections and explain how they further the organization's exempt purpose in Part XIV

5

During the year, did the organization solicit or receive donations of art, historical treasures or other similar assets to be sold to raise funds rather than to be maintained as part of the organization's collection?

☐ Yes

☒ No

Part IV

Escrow and Custodial Arrangements. Complete if the organization answered "Yes" to Form 990, Part IV, line 9, or reported an amount on Form 990, Part X, line 21.

1a

Is the organization an agent, trustee, custodian or other intermediary for contributions or other assets not included on Form 990, Part X?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV and complete the following table

	Amount
1c	
1d	
1e	
1f	

2a

Did the organization include an amount on Form 990, Part X, line 21?

☐ Yes

☐ No

b

If "Yes," explain the arrangement in Part XIV

Part V

Endowment Funds. Complete if the organization answered "Yes" to Form 990, Part IV, line 10.

	(a)Current Year	(b)Prior Year	(c)Two Years Back	(d)Three Years Back	(e)Four Years Back
1a	Beginning of year balance	32,387,995	35,407,395		
b	Contributions	8,589,011	9,811,110		
c	Investment earnings or losses	130,182	-706,126		
d	Grants or scholarships				
e	Other expenditures for facilities and programs	12,421,626	12,124,384		
f	Administrative expenses				
g	End of year balance	28,685,562	32,387,995		

2

Provide the estimated percentage of the year end balance held as

a

Board designated or quasi-endowment ▶ 2.830 %

b

Permanent endowment ▶ 97.110 %

c

Term endowment ▶ 0.060 %

3a

Are there endowment funds not in the possession of the organization that are held and administered for the organization by

(i)

unrelated organizations

3a(i)

Yes

No

(ii)

related organizations

3a(ii)

No

b

If "Yes" to 3a(ii), are the related organizations listed as required on Schedule R?

3b

4

Describe in Part XIV the intended uses of the organization's endowment funds

Part VI

Investments—Land, Buildings, and Equipment. See Form 990, Part X, line 10.

Description of investment	(a) Cost or other basis (investment)	(b)Cost or other basis (other)	(c) Accumulated depreciation	(d) Book value
1a Land		680,000		680,000
b Buildings		7,378,229	198,740	7,179,490
c Leasehold improvements		3,120,021	50,000	3,070,021
d Equipment		9,349,099	7,019,601	2,329,498
e Other		49,907,019	1,126,985	48,780,033
Total. Add lines 1a-1e (Column (d) should equal Form 990, Part X, column (B), line 10(c).) ▶				62,039,042

Part XI

Reconciliation of Change in Net Assets from Form 990 to Financial Statements

1	Total revenue (Form 990, Part VIII, column (A), line 12)	1	67,090,128
2	Total expenses (Form 990, Part IX, column (A), line 25)	2	67,581,031
3	Excess or (deficit) for the year Subtract line 2 from line 1	3	-490,903
4	Net unrealized gains (losses) on investments	4	2,378,033
5	Donated services and use of facilities	5	
6	Investment expenses	6	
7	Prior period adjustments	7	
8	Other (Describe in Part XIV)	8	-720,933
9	Total adjustments (net) Add lines 4 - 8	9	1,657,100
10	Excess or (deficit) for the year per financial statements Combine lines 3 and 9	10	1,166,197

Part XII

Reconciliation of Revenue per Audited Financial Statements With Revenue per Return

1	Total revenue, gains, and other support per audited financial statements	1	69,568,614
2	Amounts included on line 1 but not on Form 990, Part VIII, line 12		
a	Net unrealized gains on investments	2a	2,378,033
b	Donated services and use of facilities	2b	
c	Recoveries of prior year grants	2c	
d	Other (Describe in Part XIV)	2d	100,453
e	Add lines 2a through 2d	2e	2,478,486
3	Subtract line 2e from line 1	3	67,090,128
4	Amounts included on Form 990, Part VIII, line 12, but not on line 1		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total Revenue Add lines 3 and 4c. (This should equal Form 990, Part I, line 12)	5	67,090,128

Part XIII

Reconciliation of Expenses per Audited Financial Statements With Expenses per Return

1	Total expenses and losses per audited financial statements	1	67,581,031
2	Amounts included on line 1 but not on Form 990, Part IX, line 25		
a	Donated services and use of facilities	2a	
b	Prior year adjustments	2b	
c	Other losses	2c	
d	Other (Describe in Part XIV)	2d	
e	Add lines 2a through 2d	2e	
3	Subtract line 2e from line 1	3	67,581,031
4	Amounts included on Form 990, Part IX, line 25, but not on line 1:		
a	Investment expenses not included on Form 990, Part VIII, line 7b	4a	
b	Other (Describe in Part XIV)	4b	
c	Add lines 4a and 4b	4c	
5	Total expenses Add lines 3 and 4c. (This should equal Form 990, Part I, line 18)	5	67,581,031

Part XIV

Supplemental Information

Complete this part to provide the descriptions required for Part II, lines 3, 5, and 9, Part III, lines 1a and 4, Part IV, lines 1b and 2b, Part V, line 4, Part X, Part XI, line 8, Part XII, lines 2d and 4b, and Part XIII, lines 2d and 4b. Also complete this part to provide any additional information.

Identifier	Return Reference	Explanation
SCHEDULE D, PART X, 2	SUPPLEMENTAL INFORMATION	The Corporation is generally exempt from federal income tax under Section 501(c)(3) of the Internal Revenue Code. However, the Corporation may be subject to the tax on unrelated business income. The Corporation is not subject to state income taxes. The Corporation applies the provisions of FIN 48, Income Taxes, with respect to uncertain tax positions. FIN 48 requires that all tax positions be evaluated using a recognition threshold and measurement of a tax position taken or expected to be taken in a tax return. Differences between positions taken in a tax return and amounts recognized in the financial statements are recorded as adjustments to income taxes payable or receivable, or adjustments to deferred taxes, or both. FIN 48 also requires expanded disclosures at the end of each annual reporting period. No amounts have been recorded at June 30, 2010 or 2009 with respect to uncertain tax positions.
SCHEDULE D, PART III, 4	ORGANIZATION'S COLLECTIONS	KANSAS ATHLETICS, INCORPORATED MAINTAINS A COLLECTION OF VARIOUS DONATED ATHLETIC MEMORABILIA FOR PUBLIC EXHIBITION. THE COLLECTION IS NOT INCLUDED ON THE ORGANIZATION'S FINANCIAL STATEMENTS. THE COLLECTION FURTHERS THE EXEMPT PURPOSE OF THE ORGANIZATION BY SUPPORTING THE INTERCOLLEGIATE ATHLETIC PROGRAM FOR THE UNIVERSITY.
SCHEDULE D, PART XI, 8	RECONCILIATION OF CHANGE IN NET ASSETS	TRANSFER OF ASSETS TO UNIVERSITY -\$720,933
SCHEDULE D, PART XII, 2D	RECONCILIATION OF REVENUE	INCOME RELATING TO UNRELATED BUSINESS ACTIVITIES \$100,453
SCHEDULE D, PART V, 4	ENDOWMENT FUNDS	The Organization's intended use of the endowment funds is for Scholarships, Fellowships, Awards, salaries, services and other organizational support.

Additional Data

Software ID:

Software Version:

EIN: 48-6033929

Name: KANSAS ATHLETICS INCORPORATED

Form 990, Schedule D, Part X, - Other Liabilities

1	(a) Description of Liability	(b) Amount
	ACCRUED EXPENSES	5,721,608
	ADVANCE TICKET SALES	11,551,751
	ACCRUED INTEREST PAYABLE	260,964
	BOND ISSUANCE PREMIUM	214,195
	CAPITAL LEASE OBLIGATION	1,816,442
	CONTRIBUTIONS PAYABLE	5,192,489
	DUE TO KANSAS UNIVERSITY ENDOW	0
	NOTES PAYABLE - JAYHAWK TENNIS FACILITY	2,849,013

Schedule I
(Form 990)

Department of the Treasury
Internal Revenue Service

Name of the organization
KANSAS ATHLETICS INCORPORATED

Grants and Other Assistance to Organizations,
Governments and Individuals in the United States

Complete if the organization answered "Yes," to Form 990, Part IV, line 21 or 22.
▶ Attach to Form 990

OMB No 1545-0047

2009

Open to Public
Inspection

Employer identification number
48-6033929

Part I

General Information on Grants and Assistance

- 1 Does the organization maintain records to substantiate the amount of the grants or assistance, the grantees' eligibility for the grants or assistance, and the selection criteria used to award the grants or assistance? ☒ Yes ☐ No
- 2 Describe in Part IV the organization's procedures for monitoring the use of grant funds in the United States

Part II

Grants and Other Assistance to Governments and Organizations in the United States. Complete if the organization answered "Yes" to Form 990, Part IV, line 21 for any recipient that received more than \$5,000. Check this box if no one recipient received more than \$5,000. Use Part IV and Schedule I-1 (Form 990) if additional space is needed ☐

(a) Name and address of organization or government	(b) EIN	(c) IRC Code section if applicable	(d) Amount of cash grant	(e) Amount of non-cash assistance	(f) Method of valuation (book, FMV , appraisal, other)	(g) Description of non-cash assistance	(h) Purpose of grant or assistance

- 2 Enter total number of section 501(c)(3) and government organizations ▶
- 3 Enter total number of other organizations ▶

Part III **Grants and Other Assistance to Individuals in the United States.** Complete if the organization answered "Yes" to Form 990, Part IV, line 22.
Use Schedule I-1 (Form 990) if additional space is needed.

[illegible]

Part IV **Supplemental Information.** Complete this part to provide the information required in Part I, line 2, and any other additional information.

[illegible]

Software ID:

Software Version:

EIN: 48-6033929

Name: KANSAS ATHLETICS INCORPORATED

Form 990, Schedule I, Part III, Grants and Other Assistance to Individuals in the United States

(a)Type of grant or assistance	(b)Number of recipients	(c)Amount of cash grant	(d)Amount of non-cash assistance	(e)Method of valuation (book, FMV, appraisal, other)	(f)Description of non-cash assistance
LOCAL LODGING COSTS	543		53,763	FAIR MARKET VALUE	LODGING
ROOM AND BOARD	9		1,072,631	FAIR MARKET VALUE	ROOM AND BOARD
BOOKS	256		241,369	FAIR MARKET VALUE	BOOKS
SPIRIT SQUAD	53	35,800			
TEAM MEALS	391		39,172	FAIR MARKET VALUE	TEAM MEALS
TUITION	349		4,877,266	FAIR MARKET VALUE	TUITION
EQUIPMENT	385		567,112	FAIR MARKET VALUE	EQUIPMENT
LOCAL LODGING COSTS	508	101,948			
ROOM AND BOARD	257	1,657,244			
BOOKS	135	17,795			
TUITION	1	113,873			
PROMOTIONAL WOMEN'S BASKETBALL EVENT	4951		65,858	FAIR MARKET	MISCELLANEOUS
TEAM MEALS	6	409			

Schedule J
(Form 990)

Compensation Information

OMB No 1545-0047

Department of the Treasury
Internal Revenue Service

For certain Officers, Directors, Trustees, Key Employees, and Highest
Compensated Employees
▶ Complete if the organization answered "Yes" to Form 990,
Part IV, question 23.
▶ Attach to Form 990. ▶ See separate instructions.

2009
Open to Public
Inspection

Name of the organization KANSAS ATHLETICS INCORPORATED	Employer identification number 48-6033929
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Part I

Questions Regarding Compensation

		Yes	No
1a	Check the appropriate box(es) if the organization provided any of the following to or for a person listed in Form 990, Part VII, Section A, line 1a Complete Part III to provide any relevant information regarding these items		
	<div><div><input checked="" type="checkbox"/> First-class or charter travel</div><div><input type="checkbox"/> Housing allowance or residence for personal use</div></div> <div><div><input checked="" type="checkbox"/> Travel for companions</div><div><input type="checkbox"/> Payments for business use of personal residence</div></div> <div><div><input checked="" type="checkbox"/> Tax idemnification and gross-up payments</div><div><input checked="" type="checkbox"/> Health or social club dues or initiation fees</div></div> <div><div><input type="checkbox"/> Discretionary spending account</div><div><input type="checkbox"/> Personal services (e g , maid, chauffeur, chef)</div></div>		
b	If any of the boxes in line 1a are checked, did the organization follow a written policy regarding payment or reimbursement or provision of all the expenses described above? If "No," complete Part III to explain	1b	Yes
2	Did the organization require substantiation prior to reimbursing or allowing expenses incurred by all officers, directors, trustees, and the CEO/Executive Director, regarding the items checked in line 1a?	2	Yes
3	Indicate which, if any, of the following the organization uses to establish the compensation of the organization's CEO/Executive Director Check all that apply		
	<div><div><input checked="" type="checkbox"/> Compensation committee</div><div><input checked="" type="checkbox"/> Written employment contract</div></div> <div><div><input type="checkbox"/> Independent compensation consultant</div><div><input checked="" type="checkbox"/> Compensation survey or study</div></div> <div><div><input type="checkbox"/> Form 990 of other organizations</div><div><input checked="" type="checkbox"/> Approval by the board or compensation committee</div></div>		
4	During the year, did any person listed in Form 990, Part VII, Section A, line 1a with respect to the filing organization or a related organization		
a	Receive a severance payment or change-of-control payment?	4a	Yes
b	Participate in, or receive payment from, a supplemental nonqualified retirement plan?	4b	No
c	Participate in, or receive payment from, an equity-based compensation arrangement?	4c	No
	If "Yes" to any of lines 4a-c, list the persons and provide the applicable amounts for each item in Part III		
	Only 501(c)(3) and 501(c)(4) organizations only must complete lines 5-9.		
5	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the revenues of		
a	The organization?	5a	No
b	Any related organization?	5b	No
	If "Yes," to line 5a or 5b, describe in Part III		
6	For persons listed in form 990, Part VII, Section A, line 1a, did the organization pay or accrue any compensation contingent on the net earnings of		
a	The organization?	6a	No
b	Any related organization?	6b	No
	If "Yes," to line 6a or 6b, describe in Part III		
7	For persons listed in Form 990, Part VII, Section A, line 1a, did the organization provide any non-fixed payments not described in lines 5 and 6? If "Yes," describe in Part III	7	No
8	Were any amounts reported in Form 990, Part VII, paid or accrued pursuant to a contract that was subject to the initial contract exception described in Regs section 53.4958-4(a)(3)? If "Yes," describe in Part III	8	No
9	If "Yes" to line 8, did the organization also follow the rebuttable presumption procedure described in Regulations section 53.4958-6(c)?	9	

Part II

Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees. Use Schedule J-1 if additional space needed.

For each individual whose compensation must be reported in Schedule J, report compensation from the organization on row (i) and from related organizations, described in the instructions on row (ii) Do not list any individuals that are not listed on Form 990, Part VII

Note. The sum of columns (B)(i)-(iii) must equal the applicable column (D) or column (E) amounts on Form 990, Part VII, line 1a

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Retirement and other deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base compensation	(ii) Bonus & incentive compensation	(iii) Other reportable compensation				
JERRY BAILEY	(i)	0	0	0	0	0	0	0
	(ii)	156,394	0	1,075	13,654	15,464	186,587	0
THERESA GORDZICA	(i)	0	0	0	0	0	0	0
	(ii)	130,810	0	941	11,421	14,982	158,154	0
LEW PERKINS	(i)	0	0	0	0	0	0	0
	(ii)	4,485,275	0	36,608	31,596	118,076	4,671,555	0
MARLESA RONEY	(i)	0	0	0	0	0	0	0
	(ii)	186,000	0	1,312	16,239	14,515	218,066	0
RICHARD LARIVIERE	(i)	0	0	0	0	0	0	0
	(ii)	151,045	0	755	13,304	10,142	175,246	0
LARRY KEATING	(i)	233,109	0	0	17,733	38,074	288,916	0
	(ii)	0	0	0	0	0	0	0
SEAN LESTER	(i)	214,771	0	0	16,150	36,353	267,274	0
	(ii)	0	0	0	0	0	0	0
JAMES MARCHIONY	(i)	214,400	0	0	15,993	36,763	267,156	0
	(ii)	0	0	0	0	0	0	0
DEBBIE VAN SAUN	(i)	176,676	0	0	13,175	31,228	221,079	0
	(ii)	0	0	0	0	0	0	0
MARK MANGINO	(i)	1,959,357	0	0	12,798	96,173	2,068,328	0
	(ii)	0	0	0	0	0	0	0
BILL SELF	(i)	1,066,806	0	0	12,650	74,043	1,153,499	0
	(ii)	0	0	0	0	0	0	0
BONNIE HENRICKSON	(i)	1,834,008	0	0	12,988	87,122	1,934,118	0
	(ii)	0	0	0	0	0	0	0
EDMOND P WARINNER	(i)	317,667	0	0	13,475	53,376	384,518	0
	(ii)	0	0	0	0	0	0	0
CLINT A BOWEN	(i)	282,353	0	0	13,482	52,117	347,952	0
	(ii)	0	0	0	0	0	0	0
CHRISTOPHER HOWARD	(i)	138,719	0	0	10,837	29,931	179,487	0
	(ii)	0	0	0	0	0	0	0
SUSAN WACHTER	(i)	125,251	0	0	9,541	25,861	160,653	0
	(ii)	0	0	0	0	0	0	0

Part III

Supplemental Information

Complete this part to provide the information, explanation, or descriptions required for Part I, lines 1a, 1b, 4c, 5a, 5b, 6a, 6b, 7, and 8. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
SCHEDULE J, PART 1, 4A	COMPENSATION	Mark Mangino, THE Head Football Coach, RECEIVED a \$3,000,000 severance payment.
SCHEDULE J, PART 1, 1A	COMPENSATION	Travel for companions is reported as taxable income if there was not a business purpose for the person to be included. Health and social club dues are also reported as taxable income for the employee. Lew Perkins received a grossed-up, contractual, retention payment.

Software ID:
Software Version:
EIN: 48-6033929
Name: KANSAS ATHLETICS INCORPORATED

Form 990, Schedule J, Part II - Officers, Directors, Trustees, Key Employees, and Highest Compensated Employees

(A) Name		(B) Breakdown of W-2 and/or 1099-MISC compensation			(C) Deferred compensation	(D) Nontaxable benefits	(E) Total of columns (B)(i)-(D)	(F) Compensation reported in prior Form 990 or Form 990-EZ
		(i) Base Compensation	(ii) Bonus & incentive compensation	(iii) Other compensation				
JERRY BAILEY	(i)	0	0	0	0	0	0	0
	(ii)	156,394	0	1,075	13,654	15,464	186,587	0
THERESA GORDZICA	(i)	0	0	0	0	0	0	0
	(ii)	130,810	0	941	11,421	14,982	158,154	0
LEW PERKINS	(i)	0	0	0	0	0	0	0
	(ii)	4,485,275	0	36,608	31,596	118,076	4,671,555	0
MARLESA RONEY	(i)	0	0	0	0	0	0	0
	(ii)	186,000	0	1,312	16,239	14,515	218,066	0
RICHARD LARIVIERE	(i)	0	0	0	0	0	0	0
	(ii)	151,045	0	755	13,304	10,142	175,246	0
LARRY KEATING	(i)	233,109	0	0	17,733	38,074	288,916	0
	(ii)	0	0	0	0	0	0	0
SEAN LESTER	(i)	214,771	0	0	16,150	36,353	267,274	0
	(ii)	0	0	0	0	0	0	0
JAMES MARCHIONY	(i)	214,400	0	0	15,993	36,763	267,156	0
	(ii)	0	0	0	0	0	0	0
DEBBIE VAN SAUN	(i)	176,676	0	0	13,175	31,228	221,079	0
	(ii)	0	0	0	0	0	0	0
MARK MANGINO	(i)	1,959,357	0	0	12,798	96,173	2,068,328	0
	(ii)	0	0	0	0	0	0	0
BILL SELF	(i)	1,066,806	0	0	12,650	74,043	1,153,499	0
	(ii)	0	0	0	0	0	0	0
BONNIE HENRICKSON	(i)	1,834,008	0	0	12,988	87,122	1,934,118	0
	(ii)	0	0	0	0	0	0	0
EDMOND P WARINNER	(i)	317,667	0	0	13,475	53,376	384,518	0
	(ii)	0	0	0	0	0	0	0
CLINT A BOWEN	(i)	282,353	0	0	13,482	52,117	347,952	0
	(ii)	0	0	0	0	0	0	0
CHRISTOPHER HOWARD	(i)	138,719	0	0	10,837	29,931	179,487	0
	(ii)	0	0	0	0	0	0	0
SUSAN WACHTER	(i)	125,251	0	0	9,541	25,861	160,653	0
	(ii)	0	0	0	0	0	0	0

Schedule K
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information on Tax Exempt Bonds

▶ Complete if the organization answered "Yes" to Form 990, Part IV, line 24a. Provide descriptions, explanations, and any additional information in Schedule O (Form 990).
▶ Attach to Form 990. ▶ See separate instructions.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization
KANSAS ATHLETICS INCORPORATED

Employer identification number
48-6033929

Part I

Bond Issues

	(a) Issuer Name	(b) Issuer EIN	(c) CUSIP #	(d) Date Issued	(e) Issue Price	(f) Description of Purpose	(g) Defeased		(h) On Behalf of Issuer	
							Yes	No	Yes	No
A	KANSAS DEVELOPMENT FINANCE AUTHORITY	48-1066589	485428Q66	12-07-2004	18,244,543	Refinance 1998 Issue		X		X
B	KANSAS DEVELOPMENT FINANCE AUTHORITY	48-1066589	48452KTV1	07-23-2008	32,615,566	Construction		X		X

Part II

Proceeds

		A		B		C		D		E	
1	Total proceeds of issue	18,184,813		32,452,833							
2	Gross proceeds in reserve funds	1,419,475		3,101,153							
3	Proceeds in refunding or defeasance escrows	16,581,527									
4	Other unspent proceeds										
5	Issuance costs from proceeds	183,811		351,680							
6	Working capital expenditures from proceeds										
7	Capital expenditures from proceeds	29,010,160		29,010,160							
8	Year of substantial completion	2009		2009							
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
9	Were the bonds issued as part of a current refunding issue?	X			X						
10	Were the bonds issued as part of an advance refunding issue?		X		X						
11	Has the final allocation of proceeds been made?	X		X							
12	Does the organization maintain adequate books and records to support the final allocation of proceeds?	X		X							

Part III

Private Business Use

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Was the organization a partner in a partnership, or a member of an LLC, which owned property financed by tax-exempt bonds?		X		X						
2	Are there any lease arrangements with respect to the financed property which may result in private business use?		X		X						

Part III

Private Business Use (Continued)

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
3a	Are there any management or service contracts with respect to the financed property which may result in private business use?		X	X							
3b	Are there any research agreements with respect to the financed property which may result in private business use?		X		X						
3c	Does the organization routinely engage bond counsel or other outside counsel to review any management or service contracts or research agreements relating to the financed property?		X	X							
4	Enter the percentage of financed property used in a private business use by entities other than a section 501(c)(3) organization or a state or local government	0 %		1 300 %							
5	Enter the percentage of financed property used in a private business use as a result of unrelated trade or business activity carried on by your organization, another section 501(c)(3) organization, or a state or local government										
6	Total of lines 4 and 5	0 %		1 300 %							
7	Has the organization adopted management practices and procedures to ensure the post-issuance compliance of its tax-exempt bond liabilities?	X		X							

Part IV

Arbitrage

		A		B		C		D		E	
		Yes	No	Yes	No	Yes	No	Yes	No	Yes	No
1	Has a Form 8038-T, Arbitrage Rebate, Yield Reduction and Penalty in Lieu of Arbitrage Rebate, been filed with respect to the bond issue?		X		X						
2	Is the bond issue a variable rate issue?		X		X						
3a	Has the organization or the governmental issuer identified a hedge with respect to the bond issue on its books and records?		X		X						
b	Name of provider										
c	Term of hedge										
4a	Were gross proceeds invested in a GIC?		X		X						
b	Name of provider										
c	Term of GIC										
d	Was the regulatory safe harbor for establishing the fair market value of the GIC satisfied?										
5	Were any gross proceeds invested beyond an available temporary period?		X		X						
6	Did the bond issue qualify for an exception to rebate?		X		X						

SCHEDULE M
(Form 990)

NonCash Contributions

OMB No 1545-0047

2009

Open to Public Inspection

►Complete if the organization answered "Yes" on Form 990, Part IV, lines 29 or 30.
► Attach to Form 990.

Department of the Treasury
Internal Revenue Service

Name of the organization
KANSAS ATHLETICS INCORPORATED

Employer identification number
48-6033929

Part I

Types of Property

	(a) Check if applicable	(b) Number of Contributions	(c) Revenues reported on Form 990, Part VIII, line 1g	(d) Method of determining revenues
1 Art—Works of art				
2 Art—Historical treasures				
3 Art—Fractional interests				
4 Books and publications				
5 Clothing and household goods				
6 Cars and other vehicles				
7 Boats and planes				
8 Intellectual property				
9 Securities—Publicly traded				
10 Securities—Closely held stock				
11 Securities—Partnership, LLC, or trust interests				
12 Securities—Miscellaneous				
13 Qualified conservation contribution—Historic structures				
14 Qualified conservation contribution—Other				
15 Real estate—Residential				
16 Real estate—Commercial				
17 Real estate—Other				
18 Collectibles				
19 Food inventory				
20 Drugs and medical supplies				
21 Taxidermy				
22 Historical artifacts				
23 Scientific specimens				
24 Archeological artifacts				
25 Other ► (COURTESY VEHICLE)	X	54	727,000	FMV
26 Other ► (TEAM PHYSICIAN SERVICES)	X	5	32,500	FMV
27 Other ► (CUSTOM GIFTS)	X	2	50,000	FMV
28 Other ► (FOOD AND BEVERAGE)	X	7	91,424	FMV
Other ► (AIRPLANE USAGE)	X	2	205,947	FMV
Other ► (PRINTED PRODUCTS)	X	1	10,000	FMV
29 Number of Forms 8283 received by the organization during the tax year for contributions for which the organization completed Form 8283, Part IV, Donee Acknowledgement	29	0		
30a During the year, did the organization receive by contribution any property reported in Part I, lines 1-28 that it must hold for at least three years from the date of the initial contribution, and which is not required to be used for exempt purposes for the entire holding period?	30a	Yes	No	
b If "Yes," describe the arrangement in Part II				
31 Does the organization have a gift acceptance policy that requires the review of any non-standard contributions?	31	Yes		
32a Does the organization hire or use third parties or related organizations to solicit, process, or sell non-cash contributions?	32a		No	
b If "Yes," describe in Part II				
33 If the organization did not report revenues in column (c) for a type of property for which column (a) is checked, describe in Part II				

Part II

Supplemental Information. Complete this part to provide the information required by Part I, lines 30b, 32b, and 33. Also complete this part for any additional information.

Identifier	Return Reference	Explanation
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Additional Data

Software ID:

Software Version:

EIN: 48-6033929

Name: KANSAS ATHLETICS INCORPORATED

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As Filed Data -

DLN: 93493136038431

SCHEDULE O
(Form 990)

Department of the Treasury
Internal Revenue Service

Supplemental Information to Form 990

Complete to provide information for responses to specific questions on Form 990 or to provide any additional information.
▶ Attach to Form 990.

OMB No 1545-0047

2009

Open to Public Inspection

Name of the organization KANSAS ATHLETICS INCORPORATED	Employer identification number 48-6033929
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Identifier	Return Reference	Explanation
CONFLICT OF INTEREST POLICY	PART VI, SECTION B, 12C	THE ORGANIZATION MONITORS AND ENFORCES COMPLIANCE WITH THE POLICY BY PROVIDING A COPY TO THE BOARD OF DIRECTORS AND STAFF INSTRUCTIONS FOR SELF REPORTING ARE INCLUDED IN THE POLICY THE BOARD PROVIDES A COPY OF SUBSTANTIAL INTEREST FORM TO CORPORATE COUNSEL FOR REVIEW ANNUALLY

Identifier	Return Reference	Explanation
COMPENSATION REVIEW	PART VI, SECTION B, 15B	A compensation commttee, as established in the bylaw s, meets at least annually to review compensation of disqualified individuals The compensation commttee consists of at least three current board members The organization's legal counsel provides comparable salary data utlizing conference and national data for comparable positions Minutes of the meeting are recorded, review ed and voted upon by the committee members The minutes reflect discussion and decisions of the committee

Identifier	Return Reference	Explanation
FORM 990 REVIEW	PART VI, SECTION B, 11A	The information return w as review ed in depth by the audit committee of the governing body The chief financial officer met separately w ith the secretary-treasurer and the other members of the audit committee It w as then forw arded to all members of the governing body in electronic form on the due date

Identifier	Return Reference	Explanation
DIVERSION OF ASSETS	PART VI, SECTION A, 5	Individuals w ere indicted and subsequently plead guilty to selling complimentary tickets for their ow n personal benefit and gain The individuals w ere able to manipulate the ticket system so that the theft of the complimentary tickets w as not detected The organization engaged Foulston Seifkin to investigate Losses w ere in the range of \$1 million to \$3 million As a result of the investigation, the organization has implem ented many internal controls w ithin the ticket office including hiring a new Ticket Office Director In addition, the University hired a forensic auditor w ho reports to the University Director of Internal Audit The forensic auditor is focusing her time on the internal controls w ithin the ticket operation and the corporation as a w hole

Identifier	Return Reference	Explanation
PUBLIC DISCLOSURE	PART VI, SECTION C, 19	Various documents are available on the web site of the organization Documents not posted there are availabe through the Kansas Open Records Act

Identifier	Return Reference	Explanation
ADDRESSES	PART VI, SECTION A, 9	Michael Smith 1606 Sherman Street Goodland, KS 67735 Mason Heilman 2116 Terrace Road Lawrence, KS 66049 Richard Larviere University of Oregon 110 Johnson Hall Eugene, OR 97403 Lew Perkins 1729 Lake Alvarmar Drive Lawrence, KS 66047

Identifier	Return Reference	Explanation
HOURS WORKED FOR RELATED ORGANIZATIONS	PART VII, COLUMN A	The follow ing individuals w orked 45 hours per w eek for related organizations Jerry Bailey Theresa Gordzica Lew Perkins Marlesa Roney Danny Anderson The follow ing individuals w orked 15 hours per w eek for related organizations Michael Smith Mason Heilman

Identifier	Return Reference	Explanation
Part VI, SECTION A, 5		Three "disqualified persons", as determ ined by Kansas Athletic, Incorporated's legal counsel, w ere indicted and subsequently plead guilty to selling complimentary tickets for their ow n personal benefit and gain The amount of losses are indeterminable and w ere not authorized THE INVESTIGATION IS CONTINUING AND ONCE MORE DETERMINABLE NUMBERS ARE FOUND ANY ADDITIONAL IRS REPORTING THAT WILL BE NECESSARY WILL BE COMPLETED

SCHEDULE R (Form 990)	Related Organizations and Unrelated Partnerships	OMB No 1545-0047
		2009
		Open to Public Inspection

Department of the Treasury
Internal Revenue Service

Name of the organization KANSAS ATHLETICS INCORPORATED	Employer identification number 48-6033929
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Part I

Identification of Disregarded Entities (Complete if the organization answered "Yes" on Form 990, Part IV, line 33.)

(a) Name, address, and EIN of disregarded entity	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Total income	(e) End-of-year assets	(f) Direct controlling entity
JAYHAWK TENNIS FACILITY 5200 CLINTON PARKWAY LAWRENCE, KS 66047 27-1727240	Tennis Club	KS	214,229	3,244,245	Kansas Athle

Part II

Identification of Related Tax-Exempt Organizations (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related tax-exempt organizations during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Exempt Code section	(e) Public charity status (if section 501(c)(3))	(f) Direct controlling entity
UNIVERSITY OF KANSAS 1450 JAYHAWK BLVD LAWRENCE, KS 66045 48-1124839	EDUCATION	KS	115(A)	N/A	
KU CENTER FOR TECH COMMERCIALIZATIONINC 3901 RAINBOW BLVD KANSAS CITY, KS 66160 26-2838693	PATENTS	KS	501(c)3	5	
KU MEMORIAL CORPORATION 1301 JAYHAWK BLVD LAWRENCE, KS 66045 48-6033927	RETAIL	KS	501(c)3	5	
KU MEDICAL CENTER RESEARCH INSTITUTE INC 3901 RAINBOW ROAD KANSAS CITY, KS 66160 48-1008830	ADMIN	KS	501(c)3	5	
KU MEDICAL CENTER RESEARCH PROPERTIES 3901 RAINBOW BLVD KANSAS CITY, KS 66160 48-1172394	REAL ESTATE	KS	501(c)3	5	
KU HEALTH PARTNERS 3901 RAINBOW BLVD KANSAS CITY, KS 66160 48-1149398	HEALTH CARE	KS	501(c)3	5	
KU CENTER FOR RESEARCH 2385 IRVING HILL ROAD LAWRENCE, KS 66045 48-0680117	ADMIN	KS	501(c)3	5	

Part III

Identification of Related Organizations Taxable as a Partnership (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a partnership during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Predominant income (related, unrelated, excluded from tax under sections 512- 514)	(f) Share of total income	(g) Share of end-of-year assets	(h) Disproportionate allocations?		(i) Code V—UBI amount in box 20 of Schedule K-1 (Form 1065)	(j) General or managing partner?	
							Yes	No		Yes	No

Part IV

Identification of Related Organizations Taxable as a Corporation or Trust (Complete if the organization answered "Yes" on Form 990, Part IV, line 34 because it had one or more related organizations treated as a corporation or trust during the tax year.)

(a) Name, address, and EIN of related organization	(b) Primary activity	(c) Legal domicile (state or foreign country)	(d) Direct controlling entity	(e) Type of entity (C corp, S corp, or trust)	(f) Share of total income	(g) Share of end-of-year assets	(h) Percentage ownership

Part V

Transactions With Related Organizations

(Complete if the organization answered "Yes" on Form 990, Part IV, line 34, 35, or 36.)

Note. Complete line 1 if any entity is listed in Parts II, III or IV

1 During the tax year, did the organization engage in any of the following transactions with one or more related organizations listed in Parts II-IV?

a Receipt of (i) interest (ii) annuities (iii) royalties (iv) rent from a controlled entity

b Gift, grant, or capital contribution to other organization(s)

c Gift, grant, or capital contribution from other organization(s)

d Loans or loan guarantees to or for other organization(s)

e Loans or loan guarantees by other organization(s)

f Sale of assets to other organization(s)

g Purchase of assets from other organization(s)

h Exchange of assets

i Lease of facilities, equipment, or other assets to other organization(s)

j Lease of facilities, equipment, or other assets from other organization(s)

k Performance of services or membership or fundraising solicitations for other organization(s)

l Performance of services or membership or fundraising solicitations by other organization(s)

m Sharing of facilities, equipment, mailing lists, or other assets

n Sharing of paid employees

o Reimbursement paid to other organization for expenses

p Reimbursement paid by other organization for expenses

q Other transfer of cash or property to other organization(s)

r Other transfer of cash or property from other organization(s)

Yes

No

1a

1b

1c

1d

1e

1f

1g

1h

1i

1j

1k

1l

1m

1n

1o

1p

1q

1r

No

No

No

Yes

No

No

No

No

No

No

No

No

No

No

No

No

2 If the answer to any of the above is "Yes," see the instructions for information on who must complete this line, including covered relationships and transaction thresholds

(a)

Name of other organization

(b)

Transaction type(a-r)

(c)

Amount involved

(1)

(2)

(3)

(4)

(5)

(6)

Schedule R (Form 990) 2009

Provide the following information for each entity taxed as a partnership through which the organization conducted more than five percent of its activities (measured by total assets or gross revenue) that was not a related organization. See instructions regarding exclusion for certain investment partnerships.

[illegible]

Software ID:

Software Version:

EIN: 48-6033929

Name: KANSAS ATHLETICS INCORPORATED

Form 990, Schedule R, Part II - Identification of Related Tax-Exempt Organizations

(a) Name, address, and EIN of related organization	(b) Primary Activity	(c) Legal Domicile (State or Foreign Country)	(d) Exempt Code section	(e) Public charity status (if 501(c)(3))	(f) Direct Controlling Entity
UNIVERSITY OF KANSAS 1450 JAYHAWK BLVD LAWRENCE, KS66045 48-1124839	EDUCATION	KS	115(A)	N/A	
KU CENTER FOR TECH COMMERCIALIZATIONINC 3901 RAINBOW BLVD KANSAS CITY, KS66160 26-2838693	PATENTS	KS	501(c)3	5	
KU MEMORIAL CORPORATION 1301 JAYHAWK BLVD LAWRENCE, KS66045 48-6033927	RETAIL	KS	501(c)3	5	
KU MEDICAL CENTER RESEARCH INSTITUTE INC 3901 RAINBOW ROAD KANSAS CITY, KS66160 48-1008830	ADMIN	KS	501(c)3	5	
KU MEDICAL CENTER RESEARCH PROPERTIES 3901 RAINBOW BLVD KANSAS CITY, KS66160 48-1172394	REAL ESTATE	KS	501(c)3	5	
KU HEALTH PARTNERS 3901 RAINBOW BLVD KANSAS CITY, KS66160 48-1149398	HEALTH CARE	KS	501(c)3	5	
KU CENTER FOR RESEARCH 2385 IRVING HILL ROAD LAWRENCE, KS66045 48-0680117	ADMIN	KS	501(c)3	5	

Additional Data

Software ID:
Software Version:
EIN: 48-6033929
Name: KANSAS ATHLETICS INCORPORATED

Form 990, Part VII - Compensation of Officers, Directors, Trustees, Key Employees, Highest Compensated Employees, and Independent Contractors

(A) Name and Title	(B) Average hours per week	(C) Position (check all that apply)						(D) Reportable compensation from the organization (W-2/1099-MISC)	(E) Reportable compensation from related organizations (W-2/1099-MISC)	(F) Estimated amount of other compensation from the organization and related organizations
		Individual trustee or director	Institutional Trustee	Officer	Key employee	Highest compensated employee	Former			
JERRY BAILEY FACULTY REPRESENTATIVE	20 0	X						0	157,469	29,118
THERESA GORDZICA SECRETARY/TREASURER	2 0	X		X				0	131,751	26,403
LEW PERKINS CHAIRPERSON/CEO	50 0	X		X				0	4,521,883	149,672
MARLESA RONEY VICE PROVOST	1 0	X						0	187,312	30,754
DANNY ANDERSON Interim Provost	1 0	X						0	102,388	16,230
MICHAEL SMITH STUDENT BODY PRESIDENT	1 0	X						0	2,027	14
MASON HEILMAN STUDENT BODY PRESIDENT	1 0	X						0	7,435	186
SUSAN WACHTER CHIEF FINANCIAL OFFICER	50 0			X				125,251	0	35,402
LARRY KEATING SR ASSOCIATE ATHL DIRECTOR	50 0				X			233,109	0	55,807
SEAN LESTER ASSOC A/D - INTERNAL AFFAIRS	50 0				X			214,771	0	52,503
JAMES MARCHIONY ASSOC A/D - EXTERNAL AFFAIRS	50 0				X			214,400	0	52,756
DEBBIE VAN SAUN ASSOC A/D - SR WOMAN ADMIN	50 0				X			176,676	0	44,403
CHRISTOPHER HOWARD ASSOCIATE ATHLETICS DIRECTOR	50 0				X			138,719	0	40,768
MARK MANGINO HEAD FOOTBALL COACH	60 0					X		1,959,357	0	108,971
BILL SELF HEAD MEN'S BASKETBALL COACH	60 0					X		1,066,806	0	86,693
BONNIE HENRICKSON HEAD WOMEN'S BASKETBALL COACH	60 0					X		1,834,008	0	100,110
EDMOND P WARINNER ASST FOOTBALL COACH	60 0					X		317,667	0	66,851
CLINT A BOWEN ASSISTANT FOOTBALL COACH	60 0					X		282,353	0	65,599
RICHARD LARIVIERE EXEC VICE CHANCELLOR/PROVOST	1 0						X	0	151,800	23,446

Form 990, Part IX - Statement of Functional Expenses - 24a - 24e Other Expenses

<i>Do not include amounts reported on line 6b, 8b, 9b, and 10b of Part VIII.</i>	(A) Total expenses	(B) Program service expenses	(C) Management and general expenses	(D) Fundraising expenses
SUPPLIES	1,312,932	650,593	538,218	124,121
TELEPHONE	549,703	298,768	223,480	27,455
POSTAGE AND SHIPPING	182,011	106,050	48,232	27,729
EQUIPMENT RENTAL	745,261	208,802	522,169	14,290
PRINTING AND PUBLICATIONS	610,910	267,070	253,218	90,622